## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

MS1-1696US

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                |   |                                       |   |                     |                  |     | SMALL ENTITY TYPE   |                        | OR         | OTHER<br>SMALL      |                        |
|---|----------------|---|---------------------------------------|---|---------------------|------------------|-----|---------------------|------------------------|------------|---------------------|------------------------|
| TC  | TAL CLAIMS     |   | 32                                    |   |                     |                  |     | RATE                | FEE                    | ]          | RATE                | FEE                    |
| FOR   |                |   | NUMBER FILED                          |   | NUMBER EXTRA        |                  |     | BASIC FEE           | 385.00                 | OR         | BASIC FEE           | 770.00                 |
| TC  | TAL CHARGEA    | ABLE CLAIMS                                 | 32 mir                                | nus 20=                                       | · 12                |                  |     | X\$ 9=              |                        | OR         | X\$18=              |                        |
| INDEPENDENT CLAIMS  |                |   | 4 mi                                  | nus 3 =                                       | * 1                 |                  |     | X43=                |                        | OR         | X86=                |                        |
| ML  | ILTIPLE DEPEN  | NDENT CLAIM P                               | RESENT                                |   |                     |                  |     | +145=               | <del>}</del>           | OR         | +290=               |                        |
| * If  | the difference | in column 1 is                              | less than zero, enter "0" in column 2 |   |                     |                  | İ   | TOTAL               |                        | OR         | TOTAL               |                        |
|   | С              | LAIMS AS A                                  | MENDED                                | ENDED - PART II (Column 2) (Column 3)         |                     |                  |     | SMALL               | ENTITY                 | OR         | OTHER<br>SMALL      |                        |
| AMENDMENT A   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                       | HIGHI<br>NUME<br>PREVIC<br>PAID I             | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                                 | **  |                     | =                |     | X\$ 9=              |                        | OR         | X\$18=              |                        |
| AME   | Independent    | *   | Minus                                 | ***   | CL AIRA             | =                |     | X43=                |                        | OR         | X86=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                |   |                                       |   |                     |                  |     | +145=               |                        | OR         | +290=               |                        |
|   |                |   |                                       |   |                     |                  |     | TOTAL               |                        | OR         | TOTAL               |                        |
|   |                | ,   | ADDIT. FEE                            | <u></u>                                       |                     | ADDIT. FEE       |     |                     |                        |            |                     |                        |
| AMENDMENT B   |                | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                                       | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR |                     | PRESENT<br>EXTRA | , [ | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                                 | **  |                     | =                |     | X\$ 9=              |                        | OR         | X\$18=              |                        |
|   | Independent    | *   | Minus                                 | ***   |                     | =                |     | X43=                |                        | OR         | X86=                |                        |
|   | FIRST PRESE    | NTATION OF MU                               | JLTIPLE DEF                           | ENDEN   | CLAIM               |                  |     | +145=               |                        | OR         | +290=               |                        |
|   |                |   |                                       |   |                     |                  |     | TOTAL<br>ADDIT, FEE |                        | OR         | TOTAL<br>ADDIT. FEE |                        |
|   |                |   |                                       |   |                     |                  |     |                     |                        |            |                     |                        |
| AMENDMENT C   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                                       | HIGHE<br>NUME<br>PREVIO<br>PAID F             | BER<br>USLY         | PRESENT<br>EXTRA |     | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                                 | **  |                     | =                |     | X\$ 9=              |                        | OR         | X\$18=              |                        |
|   | Independent    | *   | Minus                                 | ***<br>ENDENT CLAIN                           |                     | -                |     | X43=                |                        | OR         | X86=                |                        |
|   | FINOT PHESE    | INTATION OF MU                              | ILLIPLE DEF                           | CINDENT                                       | CLAIIVI             | <u> </u>         |     | +145=               |                        | OR         | +290=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE   |                |   |                                       |   |                     |                  |     |                     |                        | _ <b>I</b> | TOTAL               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |                                       |   |                     |                  |     |                     |                        |            |                     |                        |